



# COGNITIVE IMPAIRMENT & THE IMPLICATIONS FOR SUBSTANCE ABUSE TREATMENT

## 8 CEHS ONLINE COURSE



Mountain West  
**ATTC**  
Unifying science, education  
and services to transform lives.

Addiction Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration

### OBJECTIVES

- Increase your understanding of the different structures and functions of the brain;
- Raise your awareness of how drugs of abuse impact cognitive systems;
- Generate understanding of the types of impairments which occur and the implications for treatment; &
- Increase understanding of the types of modifications which need to be made to treatment protocols to increase client retention and success.

### DATES

September 21 - October 16, 2009

### LENGTH

4 weeks

### COST

\$40.00 **No refunds.**

### ONLINE COURSE DETAILS (8 CEHS)

Enrollment: First come-first serve

Enrollment limit: 25 Maximum (No waiting list.)

Instructor: Barbara Sullivan, Ph.D.

Contact Hours: 8 (Must complete all coursework to receive a passing grade/certificate. No partial hours may be earned.)

#### INSTRUCTOR

Barbara Sullivan, Ph.D.

#### CERTIFICATE

Certificate will be mailed to address on form to those who pass all coursework. No partial CEHS are available. Instructor is responsible for grading and all grades are Pass/Fail. This course is worth 8 contact hours. NAADAC #00259.

#### REGISTRATION DEADLINE

September 11, 2009

*This course is sponsored by the Mountain West ATTC, and is offered to professionals working in substance abuse treatment and the related fields in the MWATTC region. MWATTC regional professionals will be given preference.*

### REGISTRANT INFORMATION (CONTINUE ON NEXT PAGE)

Name of Registrant: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Please indicate which state you currently work in (check all that apply):

☐ CO ☐ ID ☐ NV ☐ MT ☐ UT ☐ WY Other: \_\_\_\_\_

**FAX THIS REGISTRATION TO JULIE TIEMAN 775.784.1840 OR EMAIL JTIEMAN@CASAT.ORG.**



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### PAYMENT INFORMATION

Payment Type: ☐ Credit Card ☐ Check (Make check payable to: **Board of Regents**)

Name on Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Billing Zip: \_\_\_\_\_

Card Security Code: \_\_\_\_\_

### COST

\$40.00 **No refunds.**

### CONFIRMATION

A confirmation will be sent with information on how to access the online course by September 11, 2009.

## INSTRUCTIONS

FAX OR EMAIL THIS FORM TO JULIE TIEMAN AT:

**775.784.1840**

OR

**JTIEMAN@CASAT.ORG**

FOR PAYMENT BY CHECK, MAIL TO:

**UNIVERSITY OF NEVADA, RENO**

**ATTN: JULIE TIEMAN**

**800 HASKELL, FIRST FLOOR**

**RENO, NV 89509**